

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 28 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # **709631** (6)
1. Corporation Name
UNIVERSITY OF WEST FLORIDA FOUNDATION, INC.

Principal Place of Business

Mailing Address

11000 UNIVERSITY PARKWAY
PENSACOLA FL 32514-275011000 UNIVERSITY PARKWAY
PENSACOLA FL 32514-57323. Date Incorporated or Qualified
09/21/19653a. Date of Last Report
01/26/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number

59-6166292

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00** May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOWE, D. PAT
11000 UNIVERSITY PKWY., BLDG. 10
PENSACOLA FL 32514

81 Name

Larry A. Williamson

82 Street Address (P.O. Box Number is Not Acceptable)

11000 University Parkway, Bldg. 12

83

84 City

Pensacola**FL**85 Zip Code
32514

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Larry A. Williamson, Director**

(NOTE: Registered Agent signature required when reappointing)

DATE

1-15-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VD** ☐ DELETE
NAME **NICKELSEN, ERIC**
STREET ADDRESS **2761 DUNSINANE ROAD**
CITY-ST-ZIP **PENSACOLA, FL 00000**1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **Nickelsen, Eric**
1.3 STREET ADDRESS **85 Shoreline Drive**
1.4 CITY-ST-ZIP **Gulf Breeze, FL 32561**TITLE **SD** ☒ DELETE
NAME **MARTIN, DOROTHY**
STREET ADDRESS **10100 HILLVIEW DRIVE 10-A**
CITY-ST-ZIP **PENSACOLA FL**2.1 TITLE **VD** ☐ Change ☒ Addition
2.2 NAME **Dudley H. "Bill" Greenhut**
2.3 STREET ADDRESS **4445 Devereaux Drive**
2.4 CITY-ST-ZIP **Pensacola, FL 32504**TITLE **TD** ☒ DELETE
NAME **BOARD, WILLIAM**
STREET ADDRESS **4525 SOUNDSIDE DR**
CITY-ST-ZIP **GULF BREEZE FL**3.1 TITLE **TD** ☐ Change ☒ Addition
3.2 NAME **Harold E. Marcus, Jr.**
3.3 STREET ADDRESS **7640 River Road**
3.4 CITY-ST-ZIP **Milton, FL 32583**TITLE **PD** ☒ DELETE
NAME **BAKER, RICHARD R.**
STREET ADDRESS **84 BAYBRIDGE DR**
CITY-ST-ZIP **GULF BREEZE FL**4.1 TITLE **SD** ☐ Change ☒ Addition
4.2 NAME **Robert D. Hart, Jr.**
4.3 STREET ADDRESS **4575 Francisco Road**
4.4 CITY-ST-ZIP **Pensacola, FL 32504**TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Larry A. Williamson, Director**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # **0073130/**

CR2E037 (9/96)